Family First Prevention Services Act:

Transforming the Child Welfare System Together

MARCH 2019 REGIONAL CONVENINGS



Welcome, Purpose & Agenda

Department for Children and Families

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Jane Meschberger,
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Services

Casey Family
Programs
Facilitators

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DCF Regional Directors

Pamela Beach, West Region Thomas Buell, Wichita Region Anita Cooper, Interim, East Region Shanelle Dupree, Kansas City Region

Flow for the Day.....

Morning Session

- Impromptu Networking Connecting our Work and Vision for Children and Families
- Briefing on FFPSA and Connections to Work + Q&A
- Data and Strategies Moving Forward
- Table Talk: Insights and Aha's
- Lunch on Site

Afternoon Session

- FFPSA World Café
- Sharing from World Café Discussions
- Next Steps and 15% Solutions
- Adjourn

Connecting to Our Work and Vision for Kansas's Children and Families

We will have three rounds of networking. Each round will be approximately 4-5 minutes during which each partner will share their response to the following questions...

Round 1: What is you and/or your organization's vision for improving systems for Kansas's children and families?

Round 2: How do you see yourself partnering to advance the work around FFPSA?

Round 3: What do you need, or does your organization need, to move this work forward?

Briefing on FFPSA and Connections to Work in Kansas

- Please use the white notecards at your table to write down questions during the briefing.
- Planning team members will walk around and collect them in the moment.
- We will have a round of clarifying FFPSA Q & A after the briefings and continue to collect and respond to questions throughout the convening.

Kansas Timeline

Summer 2018

- Children's Alliance of Kansas and Casey Family Programs FFPSA convening
- Advocacy with Child Welfare Task Force around prevention resources for FFPSA
- DCF Policy Review, background checks and project planning

Fall 2018

- Surveys to YRC II group home providers regarding QRTP readiness
- Explore provider agreements for inpatient SUD treatment for children in care with a parent in need of the SUD treatment

2019

- Governor's Budget Recommendations \$8M for FFPSA
- Legislative action to amend CINC code for QRTP court review and approval
- Community Conversations, RFI and RFP for evidence based prevention grants

Family First Prevention Services Act

Enacted February 9, 2018, in the Bipartisan Budget Act of 2018

The Family First Prevention Services Act (FFPSA) creates a reimbursement pathway for federal funds to provide services to keep children safely with their families. When foster care is needed, it allows federal reimbursement for care in family-based settings and certain residential treatment programs for children with demonstrated clinical need.

✓ Child welfare federal financing legislation

✓ Bipartisan support

✓ Staged implementation timeline spans several years (2018 → 2026)

Overall Themes

Reinvestment in Prevention

Emphasis on Family-based Placement

Systemic Partnership

Prevention

Who is a "Candidate"?



- ✓ Children at "imminent risk" of removal (who can remain safely at home with services)
- √ Their parents/ caregivers
- ✓ Pregnant and parenting foster youth are *per se* candidates

Who is a "Candidate"? (cont.)

- ✓ A variety of living situations may qualify
 - Child is with parent(s) but at imminent risk
 - Formal or informal kinship placements, if there is imminent risk of entering foster care
 - In an adoptive or guardianship placement at risk of disruption or dissolution
 - Aftercare services for reunified and postpermanency youth
- ✓ No income restrictions



Qualifying Prevention Services



Mental Health Services



Substance Abuse Treatment



Parenting Skills
Training

Trauma-Informed, Evidenced-Based, & provided by Qualified Clinician

Trauma-Informed

"TRAUMA-INFORMED — The services or programs...are provided under an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma and in accordance with recognized principles of a trauma-informed approach and trauma-specific interventions to address trauma's consequences and facilitate healing."

Evidence-Based Continuum

Promising

- At least 1, independently verified, "well-designed and well executed" study;
- Used some form of control measure outcomes

Supported

- Same as above + used "rigorous random-controlled trial or quasi-experimental research design"
- Carried out in usual care or practice setting
- Showed sustained effect after 6months

Well-Supported

- At least 2, independently verified, "well-designed and well-executed" studies
- used "rigorous random-controlled trial or quasi-experimental research design"
- Carried out in usual care or practice setting
- Showed sustained effect after 12months

EB Programs Under Review

- Parent-Child Interaction Therapy
 Motivational Interviewing
- Trauma-Focused Cognitive **Behavioral Therapy**
- Functional Family Therapy
- Multisystemic Family Therapy
- Families Facing the Future
- Methadone Maintenance Therapy

- Nurse-Family Partnership
- Healthy Families America
- Parents as Teachers
- KIN-Tech
- Children's Home Society of New Jersey Kinship Nav. Model

Prevention Opportunities in Kansas

DCF plans to issue a Request for Information, then Request for Proposal for ideas and evidence based program to expand our current prevention programs in the areas of:

- Mental health services
- Substance abuse services
 - Including residential, family-based svcs.
- In-home parent skill-based programs
- Kinship navigator programs
- Other related services

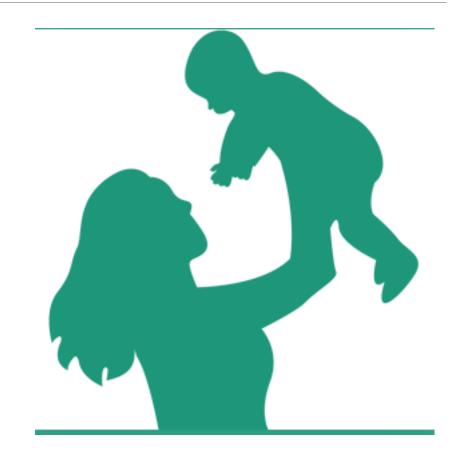
Placement

Continued IV-E Reimbursement (No Change)

- ✓ A licensed **foster family home** with 1-6 foster children
- ✓ A foster family home with 6+ youth that **meets an exception**: Sibling placements, meaningful family relationships.
- ✓ A specialized setting for youth with specialized medical needs
- ✓ A specialized setting for pregnant or parenting youth
- ✓ A specialized setting for youth who have experienced sex trafficking.
- ✓ A supervised independent living facility for youth 18 and older

New IV-E Reimbursement

- ✓ A licensed residential family-based substance abuse treatment facility for up to 12 months.
 - Must be trauma-informed
 - Up to 12 months of federal reimbursement
 - Funds became available 10/1/18



Qualified Residential Treatment Providers

- ✓ More than 6 youth
- ✓ Child resides there for more than 2 weeks
- ✓ Trauma-informed
- ✓ Facilitates family participation in treatment plan
- ✓ Registered or licensed nursing and clinical staff
- ✓ Provides discharge planning and aftercare for at least 6 months
- ✓ Licensed and accredited by COA, CARF, or JCAHO

QRTP Review

Beginning in 3rd week of residential placement, child must be in QRTP

Within 30 days of placement in QRTP, child must complete assessment that is, age-appropriate, functional and clinical.

Within 60 days of placement in a QRTP, the Court must review assessment and approve or disapprove of placement.

Placement is reconsidered at each status and permanency hearing

QRTP Opportunities in Kansas

- ✓ HB 2103 introduces CINC language for court action regarding QRTP
- ✓ Group Care provider meetings quarterly to encourage QRTP.
- ✓ Surveys regarding readiness for QRTP in August 2018 and Jan 2019
- ✓ Particularly interested in:
 - Proposals for QRTP programs
 - Ideas for Independent Assessor

Notify an interest to:

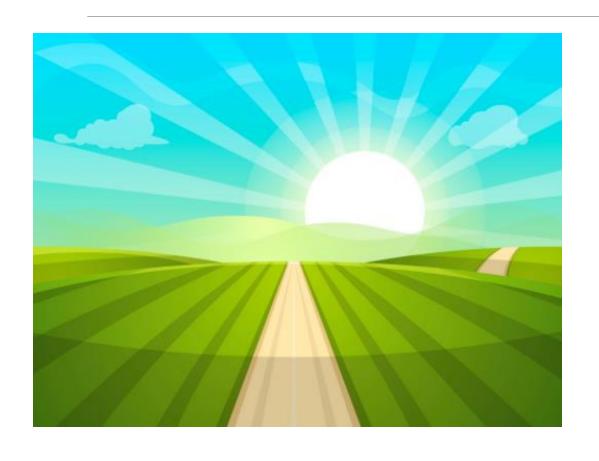
Ashley Brown

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Challenges, Opportunities & Next Steps

What are we worried about?	What's positive & exciting?	What are our next steps?
 -Who will provide these prevention services? -Many youth currently in residential – where will they go? -Recruiting and sustaining caregivers -Costs for recruiting and supporting staff -Increasing number of youth in foster care 	-Exciting to serve children earlier -Chance to grow services that we know work well -Entrepreneurial opportunity for providers to expand prevention and reunification services -Increased rigor so that children are not in residential care longer than clinically recommended. -Future trainings on trauma, use of EBP, competency in SUD/OUD, etc.	-Leadership Committees on regional and state level? -We want to hear from you with ideas and proposals to reimagine programs and services -Let's continue to work together as a child welfare system

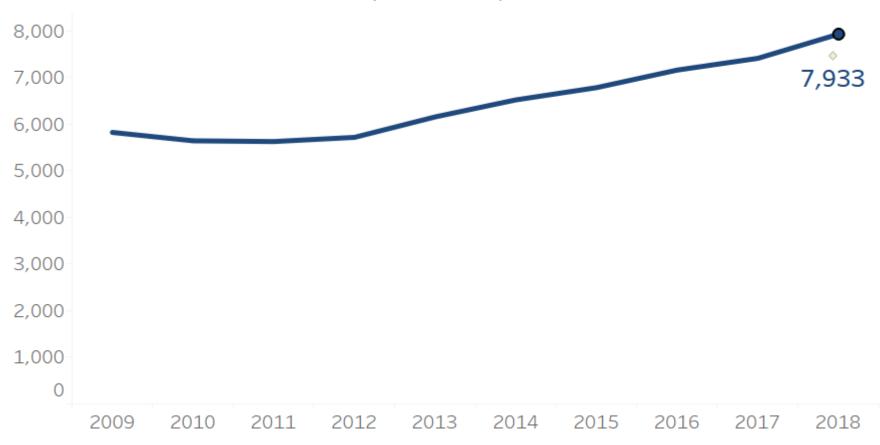
Conclusion



- Family First is a contradiction of sorts: both sweeping in changes and also quite prescriptive
- Step in the right direction with tools.
- Partnerships across systems will be critical to bring this to life in Kansas.
- Transformation will take time, but we will get there together.

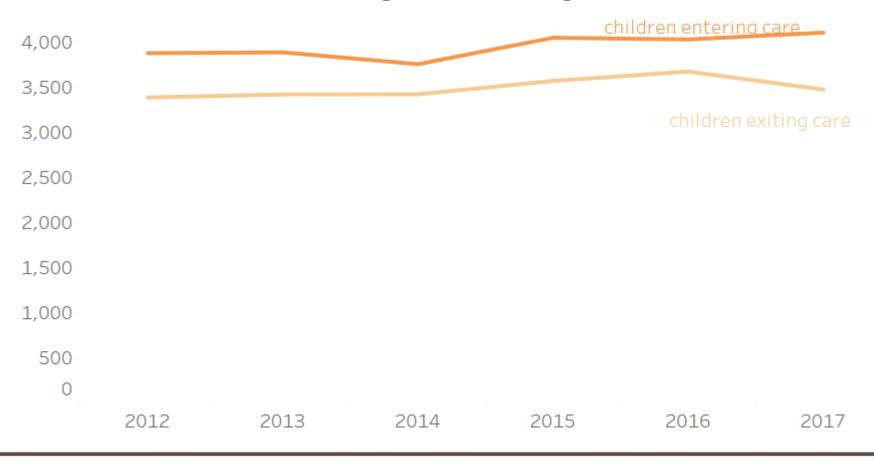
In Kansas, the number of children in foster care has had a steady increase

Number of children in care (under age 18)



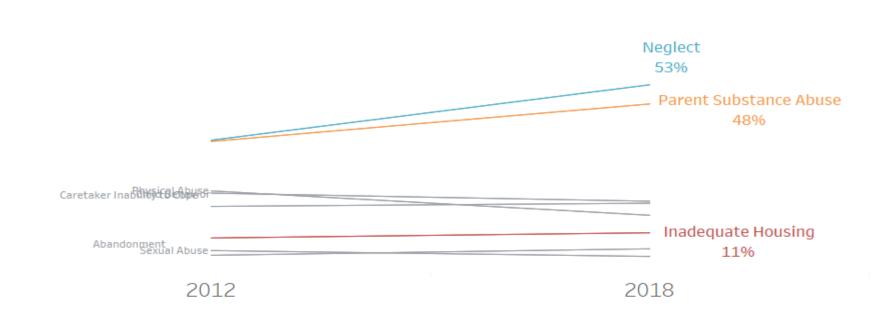
Number of Kansas children coming into foster care has consistently outpaced exits

Numbers of children exiting and entering care



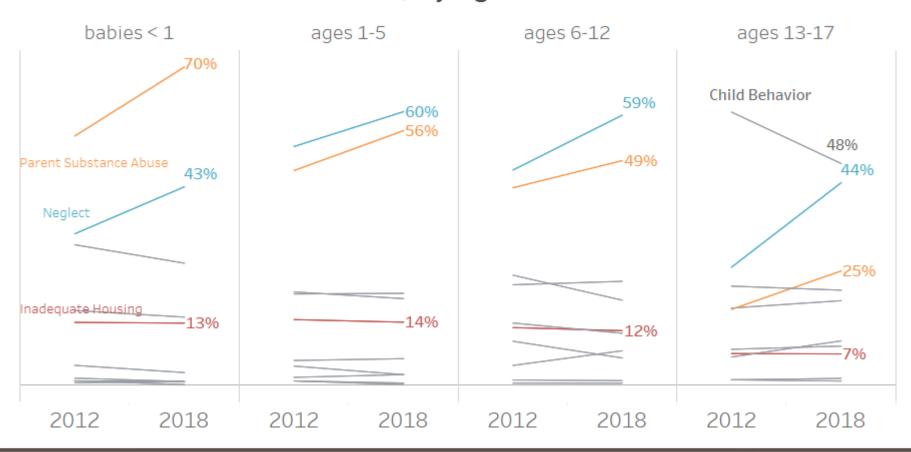
Nationally, most children come into foster care due to neglect, not abuse; parental substance use is often a contributing factor

Reasons children enter care



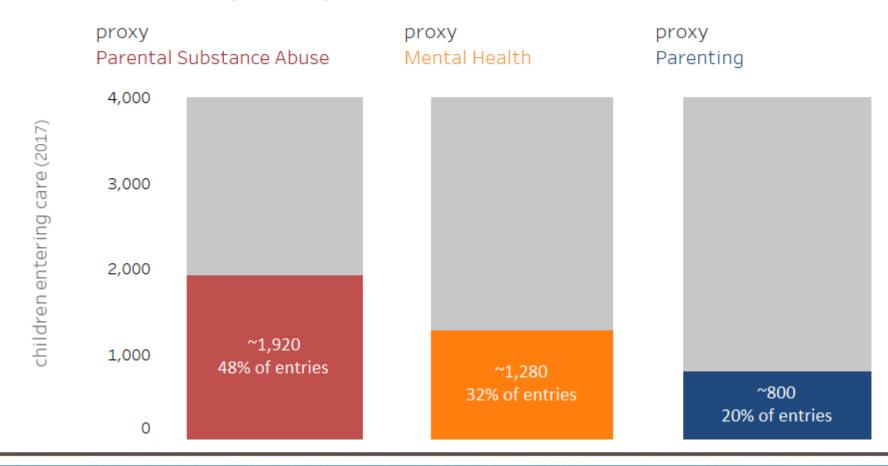
For babies in Kansas, there has been a large increase in the percent who enter foster care due to parental substance abuse

Reasons children enter care, by age

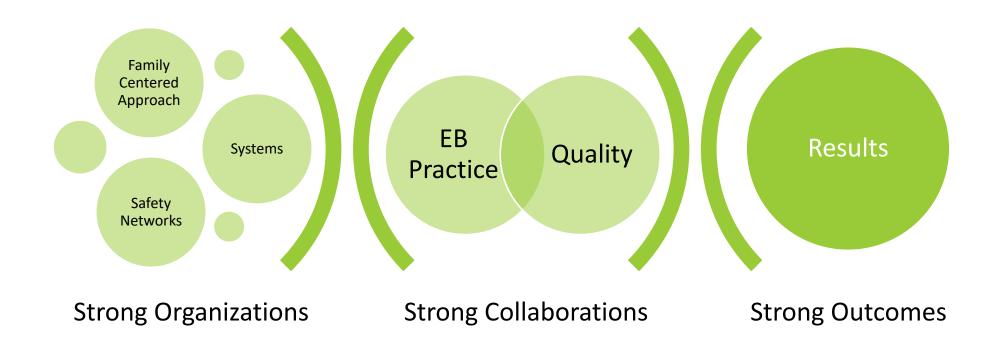


Kansas has high percentages across the 3 optional service areas as reasons for entry into foster care

Consider Family First **prevention** areas...



Kansas Practice Model



Strategy Themes and Foundation

Strong Safety, Resiliency and Prevention Networks

Strengthen Placement Stability

Strengthen Health
Care Coordination
for Children

Reduce Delays to Legal permanency

Strong Child Welfare Workforce

Informed Decisions: Outcomes Based, Safety and Data Informed Alongside families

Evidence Based Practice: Substance Use, MH, Parent Skill Based, Kinship Navigation

Kansas Emerging Approaches

- Statewide Placement Management System July 2019
- *Team Decision Making for the strongest safety plan in placement decisions, Fall 2019
- ❖ Structured Decision Making in KPRC, Fall 2019
- ❖ Rapid Permanency Reviews since 2018
- ❖Approaches Connecting Birth and Foster Families since 2018
- Caregiver Support Grant with Wichita State University since Summer 2018

Questions and Answers



Table Talk – Insights and Questions

At your table, share any insights or ahas you had from the FFPSA briefing

Write down any additional questions and bring them to the front before breaking for lunch

FFPSA World Café Discussions

- You will have the opportunity to participate in three conversations total. Each round join a new conversation.
- Conversation groups ideally should be about 6-8 participants. If a group is already at capacity please join another group.
- Each round of conversation is 15 minutes. Remember "Café Etiquette".
- During each conversation help write ideas on sticky notes (one idea per post-it) and group them together in themes.
- When time is called, move to a new table or area for a conversation on a different topic. A host from the previous round will share ideas already noted for that conversation topic.
- At the end of round three, participants in that conversation will help identify the top two or three ideas to share with the large group. This will be a very brief, quick report out.

World Café Etiquette



Focus on what is possible

Contribute your thinking

Speak your mind and heart

Listen to understand

Link and connect ideas

Listen together for insights and themes

Conversation Topic 1:

What effective prevention services and other successful innovations should Kansas consider expanding?

Conversation Topic 2:

How might we expand the availability of parent-child substance abuse treatment facilities in Kansas?

Conversation Topic 3:

How might we create a continuum of behavioral health supports for high needs youth? (in community, day treatment, etc.)

Conversation Topic 4:

What will a QRTP look like? How might current programs be repurposed and what would services look like?

Conversation Topic 5:

How might we involve courts and legal partners in the Family First vision for child welfare transformation?

Conversation Topic 6:

How might we structure the Independent Assessor requirements in order to ensure the highest quality care for youth?

Conversation Topic 7:

How might we improve engagement with and support for kinship caregivers?

Conversation Topic 8:

What does joint development and joint ownership of a 21st Century Child Welfare system look like?

Next Steps & 15% Solutions

- Next steps for FFPSA in KS
- 15% Solutions Consider what things you have the freedom and resources to do NOW to help move FFPSA forward from your position, within your organization, etc.
 - ✓ Write down two or three 15% solutions and share them with a partner
 - ✓ Each participant decide on one solution you'll put into action and write it on a sticky note to post